

Staff use only:

Receipt:

Payment type:

Date in:

Date out:



County of San Diego

DEPARTMENT OF ENVIRONMENTAL HEALTH

SAN DIEGO COUNTY VECTOR DISEASE & DIAGNOSTIC LABORATORY

5570 Overland Avenue, Suite 102, San Diego, CA 92123-1250

Telephone (858) 694-2888 Fax (858) 571-4268

ACCESSION
NUMBER

Today's Date: _____

Animal's name: _____ Species: _____ Breed: _____

Sex: _____ Spay/Neutered? _____ Age: _____ Color: _____

Veterinarian &/or Hospital: _____

Have you previously submitted an animal for services? _____ If so, approximate date(s): _____

First name: _____ Last name: _____

Address: _____

City: _____ State: _____ Zip code: _____

Phone: _____ Fax: _____ Email: _____

Driver's License #: _____ Exp. Date: _____

CHECK THE BOX(ES) BELOW FOR THE SERVICE REQUESTED:

☐ **Rabies:** Human Exposure? ____ Yes ____ No Animal Exposure? ____ Yes ____ No

☐ **Save Body:** Please check box if you want the body returned and picked up by a pet cemetery and/or vet facility for private burial or cremation. There is an additional \$20 fee for this service and is only available for animals that weigh less than 80 pounds.

For healthy dogs and cats, please provide rationale for testing: _____

Date of animal's death: _____ Euthanized? _____ Rabies Vaccinated? _____

Name of victim: _____ Date of bite/exposure: _____

Victim contact information: _____

Victim's physician*: _____ Physician's phone number: _____

**Failure to provide physician information may delay receipt of results*

☐ **Other Diagnostic Tests:** _____ Date sample taken _____

Internal Remarks (staff):

The San Diego County Vector Disease & Diagnostic Laboratory is a service and teaching institution

Revised 2/17/2011